

Privacy Act Release

Please mail completed form to:
Congressman Sean Duffy
15954 Rivers Edge Drive Suite 206
Hayward, WI 54843

Or email to: Jim.Miller@mail.house.gov

Congressman Sean Duffy and his staff have my permission to obtain any information from my records to assist me in the matter described on the reverse. Signature
Contact Information:
Name: (Please Print) (b) (6)
Mailing Address: K & A Mfg., Inc.dba RightAngle Products, 6703 Zinser Street
City, State, Zip: Schofield, WI 54476
E-Mail Address: _(b) (6)
Telephone: (b) (6)
List any or all identifying numbers that might apply to your concerns:
Date of Birth:
Social Security Number:
Federal Agency Involved: GSA, K & A GSA Contract # GS-28F-0035M -Cert. Sm. Business
Case Number: (VA Claim #, Immigration "A" #, Military ID #, Passport #, Medicare #)
Do you currently have a case pending with the involved agency in regard to this matter?
□ Yes 丞No Description:
Do you have any representation other than Congressman Duffy in regard to this matter?
(b) (6)



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Please provide a detailed outline of your problem and how you would like Congressman Duffy to assist you. Also, feel free to attach a letter or any documents in support of your claim, such as any correspondence with the applicable federal agency, including copies of relevant records, applications, denials, appeals, status updates, letters, or emails.

See Attached letter and supporting documents.

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